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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/960,227	09/20/2001	Daniel Goodman	ASX-055	5862

TITLE OF INVENTION: RF POWER SUPPLY WITH INTEGRATED MATCHING NETWORK

APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1370 \$0 \$1370 01/12/2005 EXAMINER ART UNIT CLASS-SUBCLASS HASSANZADEH, PARVIZ 1763 156-345440 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/147, Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Applied Science and Technology, Inc. Wilmington, MA Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Gov 4a. The following fee(s) are enclosed: Publication Fee (No small entity discount permitted) Advance Order - # of Copies The Director is hereby authorized by charge the required fee(s), or credit any overpay Deposit Account Number Country (enclose an extra copy of this form).					•		
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Applied Science and Technology, Inc. Wilmington, MA Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Gov. 4a. The following fee(s) are enclosed: Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies Action Free (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpay Deposit Account Number On the patent of Fee(s) is enclosed. The Director is hereby authorized by charge the required fee(s), or credit any overpay Deposit Account Number	CFR 1.363). Change of corresponded ress form PTO/SB/1 "Fee Address" indicates PTO/SB/47; Rev 03-02	dence address (or Change of 22) attached.	Correspondence	(1) the na or agents (2) the na registered 2 registered	mes of up to 3 registered pate OR, alternatively, me of a single firm (having as attorney or agent) and the nard patent attorneys or agents. It	a member a 2	kauer Rose LLP
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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).	_ ` .	`	,	☐ b. Applic	ant is no longer claiming SMA	LL ENTITY status. See 37 (CFR 1.27(g)(2).
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